



# Statement of Committee Organization

## 1. Statement Information

Date: 9/1/2019

Type: ☐ New ☒ Amended (if amending, enter MEC ID C141317 & section changed 2, 3)

## 2. Committee Information

Lucas for KC

Name of Committee

P.O. Box 413054, KCMO 64141

( )  
Telephone Number

Official Committee Email Address

County Clerk or Board of Election Commissioners

Committee Type: ☐ Campaign ☒ Candidate ☐ Continuing (PAC) ☐ Debt Service ☐ Exploratory ☐ Political Party

## 3. Treasurer/Deputy Treasurer Information

Erin Berger

Treasurer's Name (First & Last)

667 W 70TH ST, KCMO 64113

Treasurer's Mailing Address, City, State, & Zip

Ryan Munce

Deputy Treasurer's Name (if one appointed)

800 W 54TH ST, KCMO 64112

Deputy Treasurer's Mailing Address, City, State, & Zip

Treasurer's Email Address (optional)

( )

Treasurer's Home Telephone Number

( )

Treasurer's Work Telephone Number

Deputy Treasurer's Email Address (optional)

( ) 8162103889

Dep. Treasurer's Home Telephone Number

( )

Dep. Treasurer's Work Telephone Number

## 4. Additional Committee Information

AMENDMENT  
Additional Committee Officer's Name & Title (if any)

Additional Committee Officer's Mailing Address, City, State, & Zip

Connected Organization's Name (if any)

Connected Organization's Mailing Address, City, State, & Zip

CANDIDATES: Do you have more than one candidate committee? ☐ Yes (refer to instructions on back) ☒ No

## 5. Official Bank Account Information (required by all committees)

Name & Mailing Address, City, State, & Zip of Financial Institution

Account Name

Account Number

## 6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

Quinton Lucas 1851 Paseo, KCMO 64108

Name & Mailing Address, City, State & Zip of Candidate

April 4, 2023

Election Date

Mayor - KCMO

Office Sought & Political Subdivision

( )

Telephone Number (Candidate Committees Only)

( )

Political Party

Support or Oppose

## 7. Ballot Measure Supported or Opposed (campaign committees must complete this section)

Name of Ballot Measure

Election Date & Political Subdivision

Support or Oppose

## 8. Signature(s) Check certification(s) & sign (required by all committees)

☒ I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I further acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo.

Erin Berger  
Committee Treasurer

[Signature]  
Candidate (Candidate Committees Only)